FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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## **TEMPORARY** FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY								
Prefix			1	Serial				
	DATE	REC	EIVED					

,	
Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Square Mile Partners III LP	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506  Type of Filing: New Filing Amendment	Section 4(6) Section Mail Processing Section
A. BASIC IDENTIFICATION DATA	MAR 12 2009
Enter the information requested about the issuer	Washington DC
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Square Mile Partners III LP (the "Partnership")	111
Address of Executive Offices (Number and Street, City, State, Zip Code) 12 Havemeyer Place Greenwich, CT 06830	Telephone Number (Including Area Code) (203) 863-2020
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Investment vehicle.	
Type of Business Organization  corporation  limited partnership, already formed  business trust  limited partnership, to be formed	09035222
Actual or Estimated Date of Incorporation or Organization:  Month Year  O 1  Actual  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada: FN for other foreign jurisdiction	Estimated

GENERAL INSTRUCTIONS Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of § 230.503T.

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.W., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate rederal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDENT	IFICATION DATA		
2. Enter the information re	equested for the follow	ring:		<del> </del>	
• Each promo	oter of the issuer, if the	issuer has been organized wi	thin the past five years;		
<ul> <li>Each benefi issuer;</li> </ul>	icial owner having the	power to vote or dispose, or o	lirect the vote or disposition	of, 10% or more of	a class of equity securities of the
Each execut	tive officer and directo	r of corporate issuers and of	corporate general and manag	ging partners of part	nership issuers; and
<ul> <li>Each genera</li> </ul>	al and managing partne	er of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Square Mile GP III LLC (the					
Business or Residence Addres 12 Havemeyer Place Green		, City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Square Mile MM III LLC (		ber" of the GP)			
Business or Residence Addre			<del></del>		
12 Havemeyer Place Green	wich, CT 06830				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Citrin, Jeffrey B. (of the Ma	•				
Business or Residence Addres	•	, City, State, Zip Code)			
12 Havemeyer Place Green	wich, CT 06830		<u> </u>		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if Soloman, Craig H. (of the M					
Business or Residence Addres 12 Havemeyer Place Greenv	•	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (Number and Street,	City, State, Zip Code)			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (Number and Street,	City, State, Zip Code)	-		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (Number and Street,	City, State, Zip Code)	<del></del>		

					B. I!	NFORMAT	ION ABOU	T OFFERI	NG					
	Has the issue			Answer al	sell, to non	-accredited dix, Column	investors in t	this offering	;?				YES	NO
	What is the n										***************************************	········ <b>-</b>	\$10,00	0,000*
	* The Gener	ral Partne	r reserves	the right to	accept less	er amounts	•						YES	NO
3.	Does the offe	ring perm	it joint own	ership of a s	single unit?	***************************************		•••••					$\boxtimes$	
	Enter the inf similar remu associated po dealer. If mo for that broke	neration for erson or ap ore than fi er or deale	or solicitation gent of a browe (5) person or only.	on of purch oker or dea ons to be lis	asers in con ler registere	nection with ad with the S	i sales of sec SEC and/or	curities in th with a state	ne offering. or states, l	If a persor ist the nam	n to be liste e of the bro	d is an oker or		
	ame (Last na rk Hill Real													
Busine	ss or Resider	nce Addre	ss (Number	and Street,	City, State,	Zip Code)	<del></del>		_					
345	5 Park Aven	ue, 15 <sup>th</sup> Fi	loor, New Y	ork, New	York 10154	<b>,</b>								
	of Associated						*		•••			-		•
States	in Which Per	son Listed	Has Solicit	ed or Intend	ls to Solicit	Purchasers	<u></u>							
	(Check"	All States	" or check i	ndividual S	ates)						🛛 A	ll States		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[IA]	[KS]	(KY)	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	(NJ) [XT]	(NM) (UT)	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
	iness or Resi			per and Stre	et, City, Sta	te, Zip Code	<del>:</del> )		. <u> </u>					
State	s in Which P	ercon Liet	ad Has Soli	cited or Inte	ends to Solic	of Purchaser	T							
	"All States"										Па	ll States		
[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[[[	(NM)	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA] [PR]		
[RI] Full N	[SC] ame (Last na	[SD] me first, if	[TN] findividual)	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[FK]		
Bu	siness or Res	idence Ad	dress (Num	ber and Str	eet, City, St	ate, Zip Cod	e)			. <u>.</u> .				
Na	me of Associ	ated Brok	er or Dealer									•		
State	s in Which P	erson List	ed Has Soli	cited or Inte	nds to Solid	it Purchaser	s	-						
(Chec	k "All States	" or check	c individual	States)	,.,			•••••				All State:		
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
[IL]	(IN)	[IA]	[KS]	[KY]	[LA] [NM]	[ME] [NY]	[MD] [NC]	(MA) [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO [PA]	-	
[MT] [RI]	(NE)	(NV) (SDI	[NH] TNI	[נא] ואדו	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
		į	Aggregate		Amount
	Type of Security		fering Price		Already Sold
	Debt	\$	-0-	\$	-0-
	Equity	\$	-0-	\$	-0-
	Common Preferred				
	Convertible Securities (including warrants)	S	-0-	\$	-0-
	Partnership Interests	\$1	,200,000,000	\$	543,050,000
	Other (Specify)	\$	-0-	\$	-0-
	Total	\$ 1	,200,000,000	\$	543,050,000
		_			
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total line. Enter "0" if answer is "none" or "zero."  Accredited Investors	• •	Number Investors 22	\$	Aggregate Dollar Amount of Purchases 543,050,000
	Non-accredited investors		-0-	\$	-0-
	Total (for filings under Rule 504 only)	_	NA	\$	NA
	(Strings and Conty)		-	_	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  Type of offering  Rule 505	•	Type of Security NA	\$	Dollar Amount Sold NA
	Regulation A		NA	\$	NA
	Rule 504		NA	\$	NA
	Total		NA	\$	NA
	,	_			
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.  Transfer Agent's Fees.		🏻	s	-0-
	Printing and Engraving Costs			<u>-</u>	1,087.00
	Legal Fees		_	<u>-</u>	336,142.42
			_	_	
	Accounting Fees			<u>\$</u>	-0-
	Engineering Fees		_	<u>*</u>	-0-
	Sales Commissions (specify finders' fees separately)		K-21	<u>\$</u>	3,692,000.00
	Other Expenses (identify) <u>Travel and miscellaneous</u>		🖾	\$	9,952.00
	Total		🛛	\$3,	976,181.42

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRI	CE, NUMBER OF	INVESTORS, EXPI	ENSES AND USE OF	PROCE	EDS		<del>_</del>
	b. Enter the difference between the aggregate expense furnished in response to Part C - Quesissuer."	tion 4.a. This diffe	rence is the "adjusted p	gross proceeds to the			\$1,196,02	3,818.58
5.	Indicate below the amount of the adjusted grospurposes shown. If the amount for any purpose the estimate. The total of the payments listeresponse to Part C - Question 4.b above.	se is not known, fu	rnish an estimate and o	heck the box to the lef	tof			
					Di	nyments to Officers irectors & Affiliates	F	ayments to Others
	Salaries and fees				<b>⊠_</b> s_	-0-	<u> </u>	-0-
	Purchase of real estate				⊠ s	-0-	⊠ s	-0-
	Purchase, rental or leasing and installation of ma			-	$\boxtimes$ $\mathbf{s}$	-0-	⊠ s	-0-
					_ <u> </u>	-0-	_ <u></u> ⊠ s	-0-
	Construction or leasing of plant buildings and for Acquisition of other businesses (including the v				<u> </u>	<del></del> _	_ 四3	-0-
	offering that may be used in exchange for the as			-				
	issuer pursuant to a merger)				⊠ <u> </u>	-0-	_ <u>\s_</u> s_	-0-
	Repayment of indebtedness				⊠ <u>    s                                </u>	-0-	_ ⊠ <u>_s</u>	-0-
	Working capital		***************************************		<b>⊠</b> s	-0-	<u>                                      </u>	-0-
	Other (specify) Portfolio Investments			-	⊠ s	-0-	⊠ s	<del></del>
	Terrioria III							
					<b>⊠</b> s	-0-	⊠ s	-0-
	Column Totals			Ī	—— ⊠ s	-0-		96,023,818.58
								8.58
	Total Payments Listed (column totals added)					· •	1,190,023,81	0.00
	· · · · · · · · · · · · · · · · · · ·	D. FEI	DERAL SIGNAT	URE				-
an unc	suer has duly caused this notice to be signed by t lertaking by the issuer to furnish to the U.S. Secu- credited investor pursuant to paragraph (b)(2) of	rities and Exchange	y authorized person. If c Commission upon w	this notice if filed underitten request of its staff	r Rule 5 , the infe	05, the follo ormation fur	wing signatu mished by the	re constitutes e issuer to any
Issuer	(Print or Type)	Signature		Date		1	,	
Squai	e Mile Partners III LP	h			<u> </u>	3/10/6	9	
	(Print or Type)	Title of Signer (F Co-Managing M	rin (r Type) lember			, , –	•	

**ATTENTION** 

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

Name (Print or Type) Craig Solomon

